

NAME: HOWARD SMITH  
ADDRESS:  
NOT GIVEN  
NOT GIVEN

MRN#: 240-12-3456  
ACCT#: 11223399  
DOB: 05/15/1941

SSN# 999-99-9996

RACE: U

SEX: M  
RELIGION: MORM  
MARITAL STATUS: S

MANAGING MD: DR. M. ALEX  
DIAGNOSIS: C185.9  
PATIENT PHONE# 999-999-9999

EMPLOYER: NONE

EMPLOYER ADDRESS: NONE

INSURANCE PROVIDER: NONE GIVEN  
GROUP #: NONE GIVEN

ADMIT DATE: 11/06/2006

## HISTORY & PHYSICAL

CHIEF COMPLAINT: Adenocarcinoma of the prostate.

PRESENT ILLNESS: This is a 65-year-old male who is otherwise in good health. He recently had an elevated PSA of about 4 and after treatment with Cipro, he remained at 4.24. His prostate was only 30 grams and by ultrasound and biopsy, there were no hypoechoic areas. Multiple biopsies showed 4 of 12 positive biopsies for a Gleason VII adenocarcinoma. Various treatment options were discussed. The patient chose to have a radical prostatectomy if the lymph nodes were negative.

REVIEW OF SYSTEMS: Cardiorespiratory: Negative

PAST SURGICAL HISTORY: Previous surgeries include left knee surgery, left foot surgery and left hand surgery.

PAST MEDICAL HISTORY: He had a history of hepatitis.

ALLERGIES: He is allergic to Sulfa.

MEDICATIONS: He is on no medications.

### PHYSICAL EXAMINATION:

Vital Signs: Height is 6 feet, weight is 180 pounds. Blood pressure 144/80.

HEENT: Within normal limits.

Neck: Supple.

Chest: Clear.

Heart: Regular rate and rhythm.

Abdomen: Soft.

Genitalia: Normal

Extremities: Normal

Rectal: 30 gram prostate.

IMPRESSION: Adenocarcinoma of the prostate. Gleason VII in four of twelve biopsies.

PROCEDURE DATE: 11/06/2006

## OPERATIVE REPORT

PREOPERATIVE DIAGNOSIS: Adenocarcinoma of the prostate.

POSTOPERATIVE DIAGNOSIS: Adenocarcinoma of the prostate, grading and staging awaiting PD report.

ANESTHESIA: General.

ESTIMATED BLOOD LOSS: 1000 cc. Blood replaced was 3 units of autologous blood.

BRIEF CLINICAL HISTORY: This is a 65-year-old male who was otherwise in good health. He had been followed for the last 6 to 7 years with PSAs. His PSA in 1999 was 1.6 and in 2004 was 2.8. In January 2005, his PSA was 4.4 but after treatment with Cipro dropped to 3.7. Recently, his PSA was above 4 and after treatment with Cipro, remained at 4.24. His prostate was only 30 grams. He underwent ultrasound and biopsy of the prostate. There were no hypoechoic areas but 4 of 12 biopsies were positive for Gleason VII adenocarcinoma of the prostate. He had consultation with urologist and chose to have a radical prostatectomy which he is to undergo at this time.

PROCEDURE IN DETAIL: After the patient was adequately prepped and draped, an incision was made from the symphysis to the umbilicus and carried down through the skin and subcutaneous tissue until the anterior rectus fascia was opened along the line of the incision. The rectus muscle was divided in the midline and the space of Retzius entered. The peritoneum was reflected off the iliac vessels and bladder medially and superiorly. Bilateral pelvic lymphadenectomy was performed. There was scanty lymph node tissue but the nodes were negative. The lateral prostatic fascia was opened along the line of the neurovascular bundle on either side of the prostate in an avascular plane and dissection between the dorsal venous complex and membranous urethra was established and the dorsal venous complex was divided and tied proximally and distally with 2-0 chromic figure of eight sutures for hemostasis. The apex of the prostate and membranous urethra were clearly identified. The neurovascular bundle was spared on either side. The dissection between Denonvilliers fascia and the prostate was easily established and dissection up to the pedicle on either side was performed. The pedicles were clipped and divided. The seminal vesicles were mobilized and the artery of the seminal vesicle clipped and divided. The ampulla of the vas were mobilized, divided and clipped.

Next, attention was directed towards the anterior bladder neck where the prostate was separated from the bladder neck with Mayo scissors and the posterior bladder neck was divided and the prostate removed in its entirety taking care to not leave any prostatic tissue at the bladder neck. Meticulous hemostasis was obtained. Everting surfaces of 4-0 chromic were performed and the bladder neck was tapered with two sutures of 2-0 chromic that were loosely placed at the 6 o'clock position to taper the bladder neck to admit a 32 sound with ease. The double arm 2-0 chromic sutures were then placed in the membranous urethra which was well preserved and there

were placed at 11, 1, 5 and 7 o'clock and suture the newly created bladder neck. A #22 Foley with 5 cc balloon was placed into the urethra into the newly created bladder neck and inflated with 15 cc. The balloon was then pulled in the pelvis approximating the bladder neck with the membranous urethra and the sutures tied. Irrigation indicated a watertight closure. The Penrose drain was left in the retroperitoneal space and brought out through a separate stab wound and left in the incision. The muscles were closed with 0 chromic, fascia with #1 Vicryl running suture, subcutaneous with 2-0 plain, and the skin with skin staples.

Plan at this time is to leave the Foley for two weeks and have Foley and staples removed at two weeks postoperatively. PSA at 6 weeks postoperatively. If none detachable, 3 month intervals for the 1<sup>st</sup> year and then yearly thereafter.

PROCEDURE DATE: 11/06/2006

## PATHOLOGY REPORT

### SPECIMEN SUBMITTED:

- A. Node, right external, iliac/obturator, frozen
- B. Node, left external, iliac/obturator, frozen
- C. Nerve, left neurovascular bundle near urethra, frozen
- D. Prostate, radical

CLINICAL HISTORY: None given

PRE-OP DIAGNOSIS: CA prostate, history hepatitis

POST-OP DIAGNOSIS: Same

### GROSS EXAMINATION:

- A. The specimen is labeled right external iliac/obturator node. The specimen consists of fatty tissue containing nodular structures. These are isolated and submitted for frozen section. The remaining tissue is submitted for permanent section.
- B. The specimen is labeled left external iliac/obturator node. The specimen consists of a mass of fatty tissue containing nodular structures. These are isolated and submitted for frozen section. The remaining tissue is submitted for permanent section.
- C. The specimen is labeled left neurovascular bundle near urethra. The specimen consists of a .4 cm portion of pinkish tissue submitted for frozen section. The remaining tissue s submitted for permanent section.
- D. The specimen is labeled prostate. The specimen consists of prostate resection with attached seminal vesicles. Examination of the vesicles reveals no tumor. The outer surface of the gland is coated with black ink. Section of the urethral margin of resection submitted. Multiple sections of right and left lobes submitted.

### MICROSCOPIC EXAMINATION:

- A. and B. Histological exam shows fatty lymph nodes. No metastatic tumor is seen.
- C. Histological exam shows a portion of benign connective tissue showing peripheral nerve trunks. One piece shows some benign prostate tissue. No malignancy seen, however.
- D. Examination of the seminal vesicles shows no tumor. Urethral margin at resection shows no tumor. Exam of the prostate itself shows some benign hypertrophy. Focal areas of grade 3+3 adenocarcinoma are present in both lobes. Approximately 10% of the tissue is involved. The inked margin of resection shows no tumor involvement.

### FROZEN SECTION DIAGNOSIS:

- A. and B. Benign lymph nodes. No metastatic tumor seen.
- C. No malignancy noted (left neurovascular bundle).

### DIAGNOSIS:

- A. and B. Benign lymph nodes. No metastatic tumors seen (bilateral iliac/obturator nodes).

- A. Benign nerve and surrounding tissue. Portion of benign prostate tissue. No malignancy seen (left neurovascular bundle near urethra).
- B. Prostate resection:
  - 1. Grade 3+3=6 adenocarcinoma of prostate and approximately 10% of the tissue.
  - 2. Urethral margin of resection and capsular margin free of tumor.
  - 3. Seminal vesicles free of tumor.

MEMORIAL HOSPITAL - PATIENT IDENTIFICATION

Acsn #

SmithHarold

Patient Last NameFirst Name

MI Prefix Suffix

Maiden Name/Alias

999-99-9996SocSec#

240=12=3456MR #

Address

Unknown

County

City/St

UnknownZZ

Zip + 4

99999

Area Code/Phone #

999/999-9999

PT PERSONAL INFO

Birthdate

05/15/1941

Age

65

Birth Loc

999

Sex

1

Race

99

Hisp Orig

9

Race#2-5

999999

Insurance

99

Spouse Last Name/First Name

Occup

Indus

Comments

Not all demographic info available to abstractor

SECONDARY CONTACT

Phone

-

Relation

Last NameFirst NameMI

Address

CityStZip+4

DIAGNOSIS IDENTIFICATION

Seq #

00

Site

Prostate Gland

Site code

C619

Histology

Adenocarcinoma

Hist code

8140

Behavior

3

Grade

3

Coding Sys

SiteMorphConv flag

Laterality

0

Dx Confirm

1

Rpt Src

8

Casef Src

23

Class/Case

2

Supporting Text

Radical Prostatectomy 11/6/06-adenoca, gleason grd 3+3=6 in 10% of tissue resected. Margins neg. Seminal vesicles free of ca. Bil iliac and obturator LNS neg for ca.

DATE INIT DX

99/99/2006

Admit

D/C

DX EXT OF DIS

CS Tumor Sz (mm)

999

CS Extension

15

CS T Eval

#LN exam

#LN +

CS LN

00

CS N Eval

CS Ver 1<sup>st</sup>

CS Ver Latest

CS Mets

00

CS M Eval

CS SS Factors

#1

C38.4 only

#2

#3

030

C619 only

#4

#5

#6

Sum Stage

1

Version

Derived

PT

N

M

Stage

Descrip

Staged By

AJCC Ed

CT

N

M

Stage

Descrip

Staged By

Staging Descrip

Date First Course of Treatment

11/06/2006

Date Init Rx

11/06/2006

Surgery

Date

11/06/2006

Surg Prim Site

50

Scope LN

3

Other

0

Reason No Surg

0

Date

Surg Prim Site

Scope LN

Other

Reason No Surg

Date

Surg Prim Site

Scope LN

Other

Reason No Surg

OTHER TREATMENT

Date

Radiation Sum

Surg/Rad Seq

Reg Rad Rx Modal

Date

Chemotherapy Sum

Date

Hormone Sum

Date

BRM Sum

Other Rx Sum

Transpl/Endocr Sum

PHYS SEQ

N=

M=

Ref From

R=

Add

F=

Ref To

2=

Add

3=

Comments:

PT STATUS

Date Last Contact

11/06/2006

Vital Stat

1

CA Status

1

FU Source

0

COD (ICD)

ICD Revision

OVERRIDE FLAGS

Age/Site/Morph

SeqNo/Dx Conf

Site/Lat/SeqNo

Site/Type

Histol

Rept Source

Ill-def Site

Leuk,Lymph

Site/Beh

Site/Lat/Morph

Additional Data

Census Tract

Cen Cod Sys

Cen Year

Cen Tr Cert

NHIA Hisp Orig

IHS link

Comp Ethn

Comp Ethn Src

Rec Type

Unique Pt ID

Reg ID

NAACCR Rec Ver

KEY

Data items in **Bold** are required fields Other data items are optional or “advanced surveillance”  
computed field, no manual input Shaded are optional non-NPCR items